As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

	CONTACTING APPARATI	US		
				
the specification of which	(check only one item below):			
is attached hereto.				
was filed as United St	ates application			
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on			······································	
and was amended			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
on	(if applicable).			
X was filed as PCT inter	national application			
Number PCT/IB	96/01156			
on Octobe	r 28, 1996			
I hereby state that I have a claims, as amended by an	(if applicable). reviewed and understand the copy amendment referred to above disclose information which is maderal Regulations, §1.56(a).	ontents of the above-identified. naterial to the examination of	f this application i	n accordance
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Combined Declaration For Patent Applicat and Power of Attorney (Continued) (Includes Reference to PCT International Applications



ATTORNEY'S DOCKET NUMBER

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OF PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT

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